



RHODE ISLAND DEPARTMENT OF PUBLIC SAFETY
Municipal Police Training Academy

*Community College of Rhode Island — Flanagan Campus
 1762 Louisquisset Pike, Lincoln, RI 02865-4585
 Telephone: (401) 722-5808 — Fax: (401) 722-3151*



Colonel James M. Manni
 Superintendent, Rhode Island State Police
 Director, Department of Public Safety

Lieutenant Christopher J. Zarrella
 Executive Director
 Municipal Police Training Academy

Lateral Transfer Certification Checklist

Name: _____

DOB: _____

Department to: _____ **From:** _____

- I. **Conditional Offer of Employment**
- II. **Application Form**
- III. **Medical Examination and Drug Screen Report (within six (6) months)**
- IV. **National De-Certification Index (NDI)**
- V. **Background Investigation Verification Form**
- VI. **H.S. Diploma/GED/or College diploma or transcript**
- VII. **Copy of Driver's License**
- VIII. **Psychological Exam Report**
- IX. **Letter of Good standing from previous employing agency**
- X. **Documentation**

- **Current Resume to include all departmental assignments**
- **Copy of Police Academy graduation certificate**
- **Copy of all Continuing Education certificates**

Appointing authority:

Name: _____ **Signature:** _____ **Date:** _____